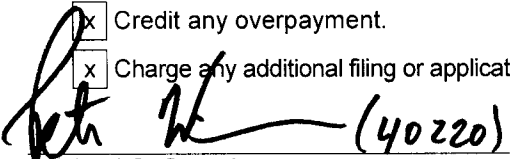


<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 000309.0053		
Application No. 10/761,424	Filing Date January 22, 2004	Examiner J. A. Stoklosa	Art Unit 3762		
Applicant(s): William J. CARROLL et al.					
Invention: SPINAL CORD STIMULATION WITH INTERFERENTIAL CURRENT					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	42	- 42 =	0	x 50.00	0.00
<b>Independent Claims</b>	8	- 8 =	0	x 210.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>23-2185</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Michael C. Greenbaum Attorney/Agent Reg. No.: 28,419			Dated: <u>April 24, 2008</u>		
BLANK ROME LLP 600 New Hampshire Ave., NW Washington, DC 20037 (202) 772-5800					